0 1 2006	this form, together w	ith applicable fee	(s), to: <u>Mail</u> or <u>Fax</u>	P.O. Box 1450 Alexandria, Virg (571)-273-2885	inia 22313-1450	hould be completed where
NSTRUCTIONS: This for perception of the percepti	rm should be used for tran respondence including the below or directed otherwise is.	Patent, advance orders in Block 1, by (a) spe	and notificatio	on of maintenance fees v correspondence address	ired). Blocks I through 5 s will be mailed to the current; and/or (b) indicating a sepa	correspondence address as arate "FEE ADDRESS" for
	CE ADDRESS (Note: Use Block 1 for			Note: A certificate of Fee(s) Transmittal. The papers. Each additional	mailing can only be used for is certificate cannot be used for paper, such as an assignment of mailing or transmission.	for any other accompanying
Robert J Schneid Chapman and Cutle 111 West Monroe	er			I hereby certify that the States Postal Service vaddressed to the Mai	rtificate of Mailing or Trans his Fee(s) Transmittal is being with sufficient postage for fir I Stop ISSUE FEE address TO (571) 273-2885, on the d	g deposited with the United st class mail in an envelope above, or being facsimile
16th Floor				Brenda A.	Walton	(Depositor's name)
Chicago, IL 60603				Brenda	A. Walton.	(Signature)
				April 26,	2006	(Date)
APPLICATION NO.	FILING DATE	FIRS	T NAMED INVE	NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/511,379 ITLE OF INVENTION: R	10/14/2004 OLLING DEVICE FOR A I	DISPLACEABLE CRO	Josef Leitner OSS FROG		1716083	2098
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	<u> </u>	\$300	\$1700	05/10/2006
EXAM	INER	ART UNIT		CLASS-SUBCLASS]	
LE, M.	ARK T	3617		246-453000	J	
Change of correspondence	e address or indication of "Fe	ee Address" (37 2.	. For printing or	n the patent front page, li	st Champa	Cutles III
"Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN 1) VAE Eisenber 2) VAE GmbH	dence address (or Change of 22) attached. tion (or "Fee Address" Indica or more recent) attached. Use DRESIDENCE DATA TO B an assignee is identified be a 37 CFR 3.11. Completion EE	Correspondence of action form to a of a Customer of this form is NOT a surface of this NOT a surface of this form is N	1) the names of or agents OR, alt 2) the name of a egistered attorned registered pater isted, no name when the control of the	cup to 3 registered pater ernatively, a single firm (having as a ey or agent) and the nam nt attorneys or agents. If will be printed. t or type) the patent. If an assigning an assignment. (CITY and STATE OR Co., Austria Austria	a member a les of up to no name is 3 lee is identified below, the d	
FR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN 1) VAE Eisenber 2) VAE GmbH lease check the appropriate a. The following fee(s) are X Issue Fee X Publication Fee (No see Advance Order - # of Change in Entity Status Change in Entity Status	dence address (or Change of 22) attached. tion (or "Fee Address" Indicator more recent) attached. Use the property of the pro	Correspondence ation form to of a Customer e of a Customer E PRINTED ON THE elow, no assignee data of this form is NOT a signature (B) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	1) the names of a gents OR, alt 2) the name of a gents OR, alt 2) the name of a gents end of a g	Tup to 3 registered pater ernatively, a single firm (having as a ey or agent) and the nam in attorneys or agents. If or type) the patent. If an assignment assignment. (CITY and STATE OR (C), Austria Austria : Individual XX C : amount of the fee(s) is endit card. Form PTO-2038 hereby authorized by chait Number no longer claiming SMA	a member a les of up to no name is 3 lee is identified below, the decountry) Orporation or other private grandles as a stached. By is attached. By is attached. By its att	oup entity Government dit any overpayment, to ra copy of this form).
FR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN 1) VAE Eisenber 2) VAE GmbH lease check the appropriate a. The following fee(s) are X Issue Fee X Publication Fee (No see Advance Order - # of Change in Entity Status Change in Entity Status	dence address (or Change of 22) attached. tion (or "Fee Address" Indicator more recent) attached. Use the property of the pro	Correspondence ation form to of a Customer e of a Customer E PRINTED ON THE elow, no assignee data of this form is NOT a signature (B) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	1) the names of a gents OR, alt 2) the name of a gents OR, alt 2) the name of a gents end of a g	Tup to 3 registered pater ernatively, a single firm (having as a ey or agent) and the nam it attorneys or agents. If vill be printed. It or type) the patent. If an assignment assignment. (CITY and STATE OR (C), Austria Austria : Individual XX C: amount of the fee(s) is end dit card. Form PTO-2036 the reby authorized by chait Number Incolonger claiming SMA or re-apply any previous than the applicant; a reg	a member a les of up to no name is 3 lee is identified below, the decountry) Orporation or other private grandles as a stached. By is attached. By is attached. By its att	oup entity Government dit any overpayment, to ra copy of this form).

This collection of information is required by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gamering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. ED Sox 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.